

PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

04-0126-HOWE

First Named Inventor

HOWE, Harold W.

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APPARATUS AND METHOD FOR RESONANT-VIBRATORY MIXING

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|--|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | Yes | No |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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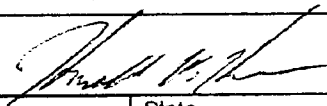
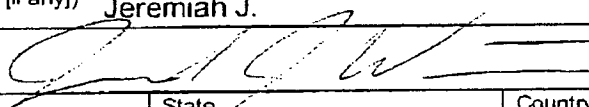
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DECLARATION — Utility or Design Patent Application

| | | | | | |
|---|--|-------------|--|---|--|
| Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 26357 | | | | OR <input type="checkbox"/> Correspondence address below | |
| Name | | | | | |
| Address | | | | | |
| City | | State | | ZIP | |
| Country | | Telephone | | Fax | |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | |
| NAME OF SOLE OR FIRST INVENTOR: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Harold W. | | | | Family Name or Surname Howe | |
| Inventor's Signature  | | | | Date Jan. 26, 2004 | |
| Residence: City Butte | | State MT | | Country USA | |
| Mailing Address 1901 South Franklin Street | | | | | |
| City Butte | | State MT | | ZIP 59701 | |
| Country USA | | | | | |
| NAME OF SECOND INVENTOR: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Jeremiah J. | | | | Family Name or Surname Warriner | |
| Inventor's Signature  | | | | Date 1/26/04 | |
| Residence: City Butte | | State MT | | Country USA | |
| Mailing Address 1901 South Franklin Street | | | | | |
| City Butte | | State MT | | ZIP 59701 | |
| Country USA | | | | | |
| <input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto. | | | | | |

[Page 2 of 2]


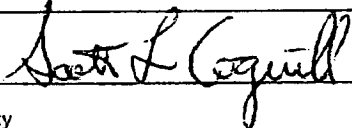
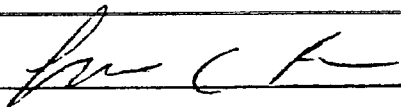
PTO/SB/02A (08-03)

Approved for use through 06/31/2003. OMB 0651-0332

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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|--------------------|--|
| DECLARATION | ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1 |
|--------------------|--|

| | | | |
|--|-------------|---|--------------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Aaron M. | | Cook | |
| Inventor's Signature  | | Date 1/26/2004 | |
| Butte Residence: City | MT State | USA Country | USA Citizenship |
| 1901 South Franklin Street Mailing Address | | | |
| Mailing Address | | | |
| Butte City | MT State | 59701 Zip | USA Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Scott L. | | Coguill | |
| Inventor's Signature  | | Date 1-26-04 | |
| Butte Residence: City | MT State | USA Country | USA Citizenship |
| 1901 South Franklin Street Mailing Address | | | |
| Mailing Address | | | |
| Butte City | MT State | 59701 Zip | USA Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Lawrence C. | | Farrar | |
| Inventor's Signature  | | Date 26 JAN 2004 | |
| Butte Residence: City | MT State | USA Country | USA Citizenship |
| 1901 South Franklin Street Mailing Address | | | |
| Mailing Address | | | |
| Butte City | MT State | 59701 Zip | USA Country |

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PTO/SB/81 (06-03)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

| | |
|------------------------|--|
| Application Number | |
| Filing Date | |
| First Named Inventor | HOWE, Harold W. |
| Title | APPARATUS AND METHOD FOR RESONANT-VIBRATORY MIXING |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 04-0126-HOWE |

I hereby appoint:

☒ Practitioners at Customer Number: 26357

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
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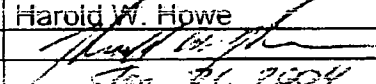
☐ The address associated with Customer Number:

OR

| | | | | | |
|--|-----------------------|-------|--------------|-----|-------|
| <input type="checkbox"/> Firm or Individual Name | Robert M. Hunter | | | | |
| Address | Robert M. Hunter PLLC | | | | |
| Address | P.O. Box 2709 | | | | |
| City | Kamuela | State | HI | Zip | 96743 |
| Country | USA | | | | |
| Telephone | 808-885-4194 | Fax | 808-885-4114 | | |

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

| | | | | | |
|-----------|---|--|--|-----------|--|
| Name | Harold W. Howe | | | | |
| Signature |  | | | | |
| Date | Jan 20, 2004 | | | Telephone | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 5 forms are submitted.

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**POWER OF ATTORNEY
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CORRESPONDENCE ADDRESS
INDICATION FORM**

| | |
|------------------------|--|
| Application Number | |
| Filing Date | |
| First Named Inventor | HOWE, Harold W. |
| Title | APPARATUS AND METHOD FOR RESONANT-VIBRATORY MIXING |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 04-0126-HOWE |

I hereby appoint:

☒ Practitioners at Customer Number: 26357

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☒ The above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:


OR

| | | | | | |
|--|-----------------------|-------|--------------|-----|-------|
| <input type="checkbox"/> Firm or Individual Name | Robert M. Hunter | | | | |
| Address | Robert M. Hunter PLLC | | | | |
| Address | P.O. Box 2709 | | | | |
| City | Kamuela | State | HI | Zip | 96743 |
| Country | USA | | | | |
| Telephone | 808-885-4194 | Fax | 808-885-4114 | | |

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(h) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name Lawrence C. Farrar

Signature 

Date 26 JAN 2004

Telephone

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| | |
|------------------------|--|
| Application Number | |
| Filing Date | |
| First Named Inventor | HOWE, Harold W. |
| Title | APPARATUS AND METHOD FOR RESONANT-VIBRATORY MIXING |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 04-0126-HOWE |

I hereby appoint:

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26357

OR

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐

The address associated with Customer Number:

OR

☐Firm or
Individual Name

Robert M. Hunter

Address

Robert M. Hunter PLLC

Address

P.O. Box 2709

City

Kamuela

State

HI

Zip

96743

Country

USA

Telephone

808-885-4194

Fax

808-885-4114

I am the:

☒

Applicant/Inventor.

☐Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name

Scott L. Poquill

Signature

Scott L. Poquill

Date

1-26-04

Telephone

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| | Examiner Name | |
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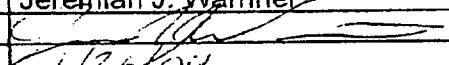
| | | | | | |
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| <input type="checkbox"/> Firm or Individual Name | Robert M. Hunter | | | | |
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| Address | P.O. Box 2709 | | | | |
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SIGNATURE of Applicant or Assignee of Record

| | | | | | |
|-----------|---|--|--|-----------|--|
| Name | Jeremiah J. Warriner | | | | |
| Signature |  | | | | |
| Date | 1/26/04 | | | Telephone | |

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| Examiner Name | |
| Attorney Docket Number | 04-0126-HOWE |

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| | | | | | |
|--|-----------------------|-------|--------------|-----|-------|
| <input type="checkbox"/> Firm or Individual Name | Robert M. Hunter | | | | |
| Address | Robert M. Hunter PLLC | | | | |
| Address | P.O. Box 2709 | | | | |
| City | Kamuela | State | HI | Zip | 96743 |
| Country | USA | | | | |
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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

| | | | |
|-----------|---|-----------|--|
| Name | Aaron M. Cook | | |
| Signature |  | | |
| Date | 1/24/2004 | Telephone | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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